CHAPTER 3 CIVIL CASE INFORMATION STATEMENT

A Civil Case Information Statement (Sample Form J) is a questionnaire about the case that appellants and cross-appellants, if any, must fill out and return to the Court of Appeal for all civil cases. The answers on the Civil Case Information Statement help the court to know whether the Notice of Appeal is on time and whether the order or judgment is appealable.

Once the Court of Appeal receives the Notice of Appeal from the superior court, the clerk mails to the appellant a notice, confirming receipt of the Notice of Appeal, along with a blank *Civil Case Information Statement* form. The completed *Civil Case Information Statement*, a copy of the judgment or order being appealed, and a Proof of Service on all parties must be filed in the Court of Appeal within 10 days. (CRC rule 1(f).)

If the *Civil Case Information Statement* is not received within the 10-day limit, the Court of Appeal clerk will send a *Notice of Default*. If the appellant does not cure the default within 15 days (presumably by correctly filing the Civil Case Information Statement), the Court may dismiss the appeal.

Sample Form J

CIVIL CASE INFORMATION STATEMENT - INSTRUCTIONS

The Civil Case Information Statement must be filed in the Court of Appeal within 10 days after the clerk mails you a notice that the form must be filed. Attach a copy of the order or judgment which you are appealing to the Civil Case Information Statement. The court recommends that the order or judgment be file-stamped and signed by the lower court judge. You also need to attach a Proof of Service to the Civil Case Information Statement showing you served a copy of the Civil Case Information Statement with its attachment on all counsel and self-represented parties. (See Sample Form C.) The Civil Case Information Statement is filed in the Court of Appeal.

This form is available online in Adobe Acrobat PDF format and may be filled out electronically for free at www.courtinfo.ca.gov/cgi-bin/forms.cgi. Select "Appellate" forms, then click on Form APP-004.

Filling out the Civil Case Information Statement form:

Caption:

- (1) Fill out the top box of the form, inserting the appropriate appellate district and division. Indicate the Court of Appeal case number in the box to the right.
- (2) In the "Attorney or Party Without Attorney" area at the top of the form, fill out your name, mailing address, and telephone number where you can be reached during the day.
- (3) In the next box down, indicate your name next to "APPELLANT" and the responding party's name next to "RESPONDENT."
- (4) In the next box down, specify the Superior Court, address, and branch name of the court that made the order or judgment you are appealing.
- (5) In the "JUDGES" box, list all of the Superior Court judges who had anything to do with your case. In the box to the right, write the Superior Court case number.

Part I - Appeal Information

- A.1. Mark the box that best describes what you are appealing.
- A.2. If your appeal disposes of all causes of action including all cross-actions between the parties check "yes". If not, check "no".
- B.1. The date of entry of judgment or order appealed from.
- B.2. The date notice of entry of the judgment or order was served or mailed. If none was served or mailed, leave this space blank.

Sample Form J

- B.3. Check "yes" if you made a motion for (a) new trial, (b) judgment notwithstanding the verdict, (c) reconsideration of an appealable order or (d) vacating the judgment, and that motion was denied. Check the "no" box if you did not make any of the above motions. If you checked yes, write in the type of motion you filed, the date the motion was filed, the date the motion was denied and the date the denial was served.
- B.4. The date you filed your notice of appeal or cross-appeal in Superior Court.
- C. Check if there is a bankruptcy case or any court issued stay which would have an affect on your appeal in the Court of Appeal. If you check this box you must attach to this form a file-stamped copy of the bankruptcy petition and any documentation related to the stay. Leave blank if there is no bankruptcy case or other court issued stay which would have an affect on your appeal in the Court of Appeal.
- D. Check "yes" if you have any related appeals, writs or any other proceeding before this or any other California appellate court. Check "no" if you do not have any other appeals, writs or proceedings before this or any other California appellate court. If you checked "yes", write the name of the court in which you have or had a case, the appellate court case number, the title of the case, name of trial court and trial court case number. If you have or had multiple cases, attach the list of cases to this form on a separate sheet of paper.
- E. Some types of cases require service of briefs or petitions on the Attorney General. Check the list on the form to see if yours is one of these types of cases. In addition, Rule 44.5(a) requires service on the Attorney General for the following types of cases: (1) those questioning the constitutionality of a state statute; (2) those in which the state or a state officer in his or her official capacity is a party; and (3) those in which a county is a party. Check the "yes" box if service on the Attorney General is required, and check the "no" box if it is not.

PART II -NATURE OF ACTION

- A. Check the box or boxes that best describe the nature of the action of your case. If it is not listed, check "Other action" and describe the nature of the case.
- B. Check this box if your case is entitled to calendar preference or priority on appeal. Write the rule of court or statute that entitles you to calendar preference or priority. Leave blank if your case is not entitled to calendar preference or priority.

PART III - PARTY AND ATTORNEY INFORMATION

On a separate sheet of paper, write or type all the parties and their attorneys of record who will participate in the appeal. For each party, list the party's name and designation in the trial court proceeding (plaintiff, defendant, etc.). For the attorneys, list the party the attorney represents, the name of the attorney, state bar number, mailing address, telephone number, fax number and email address. If the party is self-represented, list the name, designation in the trial court proceeding (plaintiff, defendant, etc.), mailing address, telephone number, fax number and email address. List only parties who will be participating in the appeal and no one else.

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At the bottom of page 2, write or type your name legibly, and date and sign the form. Serve a copy of the form on all parties. (See Sample Form C.)

Due: 10 days after the Court of Appeal clerk

notifies you the form must be filed

File: Original of Civil Case Information Statement,

judgment or order and Proof of Service on all parties. File with Court of Appeal.

Provide an extra copy to be file-stamped

for your file.

Serve: All counsel

All self-represented parties

	CIVIL	case information statemen Form J	Court of Appeal Case Number (if Known).		
COU	RT OF APPEAL,				
ATTOR	RNEY OR PARTY WITHOUT ATTO	FOR COURT USE ONLY			
L					
	TELEPHONE NO.:				
E-MAIL ADDRESS (Optional): FAX NO. (Optional):					
AT	TORNEY FOR (Name):				
APPELLANT:					
F	RESPONDENT:				
SUPE	ERIOR COURT OF CALIF	ORNIA, COUNTY OF			
	MAILING ADDRESS:				
	CITY AND ZIP CODE:				
	BRANCH NAME:				
JUDO	GES (all who participated in	n case):	Superior Court Case Number:		
shows the date it was entered (see Cal. Rules of Court, rule 2(c) for definition of "entered") and (2) proof of service of this form on all parties to the appeal. (CAUTION: An appeal in a limited civil case (Code Civ. Proc., § 85) may be taken ONLY to the appellate division of the superior court (Code Civ. Proc., § 904.2), or to the superior court (Code. Civ. Proc., § 116.710 [small claims cases]).					
A. APPEALABILITY PART I – APPEAL INFORMATION					
1	1. Appeal is from:				
	Judgment afte				
Judgment after court trial					
Default judgment					
Judgment after an order granting a summary judgment motion Judgment of dismissal under Code Civ. Proc., §§ 581d, 583.250, 583.360, or 583.430					
		ismissal after an order sustaining a demurrer			
		judgment under Code Civ. Proc., § 904.1(a)(2)			
		dgment under Code Civ. Proc., § 904.1(a)(3)–(13)			
	Uther (describ	e and specify code section that authorizes this appeal):			
2		appealed from dispose of all causes of action, including all cross of the second	s-actions between the parties?		
B. T	TIMELINESS OF APPE	AL (Provide all applicable dates.)			
1	. Date of entry of judg	gment or order appealed from:/			
2		entry of judgment or a copy of the judgment was mailed by the c	lerk or served by a party under California		
		2:/			
3		ew trial, judgment notwithstanding the verdict, reconsideration, on If yes, please specify the type of motion:	or to vacate the judgment made and denied?		
		/ Date denied:/ Date de	enial served:/		
4	. Date notice of	appeal or cross-appeal filed:/			
	BANKRUPTCY OR OTH s there a related bankru	_	Yes No If yes, please attach		
		y petition [without attachments] and any stay order.			
			Page 1 of 2		

APPELLATE	CASE TITLE:	inla Form I	SUPERIOR COURT CASE NUMBER:		
	San	iple Form J			
Is there appellate Appellate Name of E. SERVICE or agence statute the Burn Burn Burn Burn Burn Burn Burn Burn	ATE CASE HISTORY (Provide additional infonow, or has there previously been, any appear e court? Yes No If yes, insert the court case no.: If trial court: E REQUIREMENTS If of documents in this matter, including a brief by under California Rules of Court, rule 44.5 or that applies. If the court is th	I, writ, or other proceeding related in name of appellate court: Title of case: Trial court case no.: for a petition, required on the Atto a statute? Gov. Code, § 446-Act) Gov. Code, § 1268 Health & Saf. Code accommodations) Health & Saf. Code	rney General or other nonparty public office If yes, please indicate the rule or (Disabled access to public buildings) (6(a) (False Claims Act) e, § 19954.5 (Accessible seating and e, § 19959.5 (Disabled access to bublic accommodations)		
	onveyances, accommodations, and housing)				
NOTE: The rule and statutory provisions listed above require service of a copy of a party's brief or petition and brief on the Attorney General or other public officer or agency. Other statutes requiring service on the Attorney General or other public officers or agencies may also apply. (See, e.g., Code Civ. Proc., § 1355; Gov. Code, § 946.6(d); Pub. Resources Code, § 21167.7.)					
PART II – NATURE OF ACTION					
A. Nature of 1.	of action (check all that apply): Conservatorship Contract Eminent domain Equitable action a. Declaratory relie	f b. Other (describe):			
6.	6. Guardianship 7. Probate				
9.	Tort a. Medical malpractice c. Other personal injury e. Other tort (describe):	b. Product liability d. Personal property			
10. <u> </u>	Trust proceedings Writ proceedings in superior court a Mandate (Code Civ. Proc., § 1085) c Prohibition (Code Civ. Proc., § 1102		date (Code Civ. Proc., § 1094.5)		
12.	Other action (describe):				
B Thi	is appeal is entitled to calendar preference/pri	ority on appeal (cite authority):			
	PART III – PARTY	AND ATTORNEY INFORMA	TION		
include the fo	n to this form a list of all the parties and all the ollowing information: the party's name and his , include the following information: name, Stat	or her designation in the trial cour	t proceeding (plaintiff, defendant, etc.). For		
auuress.		Date:			
This stateme	nt is prepared and submitted by:	(SIGNATURE C	OF ATTORNEY OR UNREPRESENTED PARTY)		

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